

Northern Territory Risk Reduction Program

Application for NTG departments

Before you fill in the form

This form is only for Northern Territory Government (NTG) departments.

All other non-NTG organisations must apply through [GrantsNT](#).

Project manager details			
Full name		Position	
Department and business unit			
Email address		Phone number	
Relevant skills and qualifications			
Secondary project manager details			
Full name		Position	
Department and business unit			
Email address		Phone number	
Executive director endorsement			
Has the executive director (or equivalent) provided project endorsement under for funding under the NTRRP?			Y/N
Has the CEO of your department provided project endorsement for funding under the NTRRP? Without CEO endorsement, your application will <u>not</u> be considered.			Y/N

Project details			
Project title			
Commencement date		Completion date - must be completed before 30 June 2024	
Project or service location			
Project risks - provide a risk register including management strategies as an attachment to this application			
Requested funding amount (GST exclusive)			
Requested initial payment amount (GST exclusive) - optional			
Project co-contribution - cash or in-kind contribution details (if applicable)			
Total project budget - attach a completed NTRRP project budget template			
Detail your proposed project			
How does the project reduce natural disaster risk – refer to the priorities of the National Disaster Risk Reduction Framework.			
NTRRP project work plan completed and attached			Y/N

Are there any complementary projects planned?
Have previous studies/projects been conducted to support the value of the project - provide a background of the studies/projects and the outcome
Is ongoing funding required to maintain the project? If so, how will this be managed?
Has your organisation previously received grant funding under a similar grants program? If so, detail the funding and project/activity outcome
Privacy statement
<p>The information you provide in this application is necessary to determine the suitability of your organisation for NTG grant funding and will be used for this purpose and other purposes outlined below. If you don't provide the requested details, we may not be able to process your application.</p> <p>If your organisation's application is successful, the NTG will make details of the grant funding you receive available to the general public and the Australian Government (this may include personal information).</p> <p>By signing this application form you consent to your personal information being provided to other NTG agencies and the public for this purpose and for the purpose of reporting the outcomes of the grant funding. You can access, correct and update the personal information you provide to the NTG by contacting the Northern Territory Risk Reduction Program Manager.</p>

Declaration

1. All information contained in the application for grant funding together with any attachments is complete, true and correct to the best of my knowledge.
2. I am duly authorised to submit this application on behalf of the organisation named in the application.
3. I understand that providing false or incorrect information to obtain a benefit may be a criminal offence.
4. My organisation has read, understood and agrees to comply with any requirements and conditions set out in the grant information and application form for grant funding.
5. I have read, understood and agree to the privacy statement above.
6. To my knowledge, the organisation I represent:
 - a. is solvent
 - b. does not have any conflict of interest to declare in relation to the application or the grant or funding program being applied for
 - c. is in compliance with its incorporating legislation
 - d. is in compliance with all laws including work health and safety and workplace relations laws
7. I or another representative of my organisation will advise the department immediately if any of the information provided in the application changes.
8. I understand that the organisation I represent may be requested to provide further information in support of the application.
9. If and where details of an organisation other than my organisation are included in the application, I confirm that the other organisation has been made aware of and has given permission for those details to appear in the application.
10. The organisation I represent gives consent to the NTG making public its details and details of the funding or grant received should the application be successful.
11. Where my organisation has an ABN, I acknowledge that, if the application is successful, the NTG has a legislative obligation to report details of grant funding paid to my organisation to the Australian Taxation Office.

Name			
Signature		Date	

How to submit

Email your completed form to CMC.NTRRP@nt.gov.au with your project:

- budget
- work plan
- risk register.

Further information

Northern Territory Risk Reduction Program (NTRRP) Manager
 Department of the Chief Minister and Cabinet
 Phone: 08 8999 6693
 Email: cmc.ntrrp@nt.gov.au
www.cmc.nt.gov.au/ntrrp